



NEW JERSEY DIVISION OF
Fish and Wildlife
BUREAU OF SHELLFISHERIES

NEW JERSEY LICENSE APPLICATION

Make Check Payable to: State of New Jersey

Mail to: Bureau of Shellfisheries
PO Box 418
Port Republic, NJ 08241
609-748-2040

(Located on Route 9, Mile Marker 51,
Port Republic, NJ)

- | | |
|---|---------|
| <input type="checkbox"/> Commercial Clam License | \$50.00 |
| <input type="checkbox"/> Resident Recreational Clam License | \$10.00 |
| <input type="checkbox"/> Non-Resident Recreational Clam License | \$20.00 |
| <input type="checkbox"/> Oyster License | \$10.00 |
| <input type="checkbox"/> Juvenile Recreational Clam License – <input type="checkbox"/> Resident | \$ 2.00 |
| (Under 14 years of age) <input type="checkbox"/> Non-Resident | |

(NJ RESIDENTS: Enclose a photo copy of Drivers License for proof of residence)

Name of Applicant _____

Address _____

City _____ State _____

Zip Code _____ Telephone No. _____
Area Code

Birth Date _____ Height _____ Weight _____

Eyes _____ Hair _____ Sex _____

Social Security No. _____ (Required By Public Law, 1998, Chapter 1)

Is your shellfish license revoked in this or any other state? _____

Signature of Applicant Date _____